



Declaration for Nomination and Oath of Candidacy

APR 22 2021

FOR FILING
OFFICE ONLY

Filed this 22nd day of April, 2021
Document # _____
Fee paid: ☐ cash ☒ check ☐ credit
By: [Signature]
Deputy or Filing Officer

DECLARATION AND OATH OF CANDIDACY TO BE FILED WITH SECRETARY OF STATE OR COUNTY ELECTION ADMINISTRATOR AS APPLICABLE

Filing for office of: Billings City Council, Ward 5 ☐ _____ OR ☒ Nonpartisan
Full name of office including district and/or department numbers if applicable Name of Political Party

Candidate Name (printed exactly as it should appear on the ballot): Tom Rupsis

Mailing Address City and State Zip Code
PO Box 80892 Billings, MT 59108

Residence Address City and State Zip Code
105 Legends Way Billings, MT 59106

County of Residence Contact Phone Email Address Website Address
Yellowstone 406-545-0701 tom@tomrupsis.com tomrupsis.com

IF THIS DECLARATION IS FOR THE OFFICE OF GOVERNOR, YOU MUST COMPLETE THE FOLLOWING INFORMATION:

Lieutenant Governor Name (printed exactly as it should appear on the ballot): _____
Mailing Address: _____ Residence Address: _____
Phone: _____ Email Address: _____ Website Address: _____

IF THIS DECLARATION IS FOR THE STATE LEGISLATURE, YOU MUST SELECT ONE OF THE FOLLOWING:

- ☒ (a) I hereby affirm that I am either a resident of the county in which I am a candidate, if it contains one or more legislative districts, or of the legislative district if it contains all or parts of more than one county, OR
☐ (b) I hereby affirm that I will meet the residency qualification(s) in (a) above for 6 months preceding the general election and will notify the office of the Secretary of State in writing when I qualify or if I do not qualify.

FILING FEE - FEE MUST BE PAID BEFORE FILING IS VALID:

☒ Candidate Filing Fee, if applicable, in the amount of \$ 72.00 is hereby submitted with this Declaration and Oath of Candidacy.

OATH OF CANDIDACY - CANDIDATE MUST SIGN IN THE PRESENCE OF A NOTARY PUBLIC OR AN OFFICER OF THE OFFICE WHERE THIS FORM IS FILED:

I hereby affirm that I possess, or will possess within constitutional and statutory deadlines, the qualifications prescribed by the Constitution and laws of the United States and the State of Montana.

[Signature]
Signature of Candidate

4/22/2021
Date

NOTARY PUBLIC OR AUTHORIZED OFFICER

State of Montana

County of Yellowstone

Signed and sworn to before me this 20th day of April, 2021 by Thomas Rupsis

Printed Name of Candidate

[Signature]
Signature of Notary or Public Official

Samantha Zuger
Printed Name of Notary Public

Notary Public for the State of MT

Residing at: Billings

My commission expires: Oct 5, 2024

**Where to file Federal, Statewide,
State District and Legislative offices:**
Montana Secretary of State
P.O. Box 202801
State Capitol Building, 1301 E. 6th Ave
2nd Floor, Room 260
Helena, MT 59620
Online: sosmt.gov/elections/filing/
Fax: 406-444-2023

**Where to file County, City and most
Local District offices:**
County Election Office
A list of county election offices may be
found at: sosmt.gov/elections



SAMANTHA ZUGER
NOTARY PUBLIC for the
State of Montana
Residing at Billings, Montana
My Commission Expires
October 5, 2024

[SEAL/STAMP]